

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS *Patent*

Address to:
Mail Stop Post Issue
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

| | |
|------------------------|--------------------|
| Patent Number | 7,146,842 |
| Issue Date | 12/12/2006 |
| Application Number | 10/735,472 |
| Filing Date | 12/12/2003 |
| First Named Inventor | Barbanti, Giovanni |
| Attorney Docket Number | S2205-72133 |

Please change the Correspondence Address for the above-identified patent to:

☐ The address associated with Customer Number:

OR

☒ **Firm or Individual Name** Sr. Carlo Rinaldi

Studio Brevetti Nazionali ed Esteri
Dell'ing. Carlo RINALDI & C. South d.F.
Piazza di Porta Castiglione 16

Address

| | | |
|---------------------|--------------|------------------|
| City Bologna | State | ZIP 40136 |
|---------------------|--------------|------------------|

Country ITALY

| | |
|------------------|--------------|
| Telephone | Email |
|------------------|--------------|

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

This form will not affect any "fee address" provided for the above-identified patent. To change a "fee address" use the "Fee Address Indication Form" (PTO/SB/47).

I am the:

- ☐ Patentee.
- ☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 43,809

Signature /davidmixon/**Typed or Printed Name** David E. Mixon

| | |
|------------------------|-------------------------------|
| Date 12/19/2006 | Telephone 256.517.5178 |
|------------------------|-------------------------------|

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Post Issue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.